"This committee intends to make unlimited independent expendentives, and consistent with the U.S. Court of Appeals for the District of Columbia Civicuit Herefore Intends to raise funds it = unlimited accounts. This communities with a speech way. not use those funds to make Contributions, whether direct, in Kind, or via coordinated communications, to Federal canidates or committées." Green Home Relief 2 60 Costle Cf. San Jacinto, CA 92583 Jacobt. Wieck treasurer

1403121100

FEC FORM 1

Only

STATEMENT OF **ORGANIZATION**

RECEIVED

2014 APR 14 AM 10: 59

			Office, Use	
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	MAIL CENTE
GREEN HOME	RELIEFI			لىبىب
				لتتتا
ADDRESS (number and street)	12,20, CASTL	E CITI		لسسسا
(Check if address is changed)				
	CITY A	VITIO	LA 9258	ZIP CODE A
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address is changed)	5,48,49,008,m	1911/1.40m		
, and an 3 -1,	Optional Second E-Mail Ac	idress		
(Check if address is changed)		<u> </u>		
2. DATE 1 2 1	\$ 2013			
3. FEC IDENTIFICATION N	JMBER ▶ C			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined the	nis Statement and to the bes	t of my knowledge and belief it	is true, correct and comple	te.
Type or Print Name of Treasure	·			
Signature of Treasurer			Mate / Date	/ Y Y Y Y
NOTE: Submission of false, erron		may subject the person signing to		s of 2 U.S.C. §437g.
Office Use		For further information of Federal Election Commission Toll Free 800-424-9530	on FEC	FORM 1 ed 06/2012)

Local 202-694-1100

5.

FEC Fo	m 1 (Revised 02/2009)	Page 2					
TYPE OF C	OMMITTEE Committee:						
(a)	This committee is a principal campaign committee. (Complete the candidate information below.))					
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
Name of Candidate							
Candidate Party Affiliation	Office on Sought: House Senate President	State District					
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.						
Name of Candidate							
Party Con							
(d)	(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.					
Political A	ction Committee (PAC):						
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a:					
	Corporation Corporation w/o Capital Stock	Labor Organization					
	Membership Organization Trade Association	Cooperative					
	In addition, this committee is a Lobbyist/Registrant PAC.						
w X	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	egregated fund or party					
	In addition, this committee is a Lobbyist/Registrant PAC.						
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
Joint Fund	raising Representative:						
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political					
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political					
Com	mittees Participæting in Joint Fundraiser						
1.	FEC ID number C						
2.	FEC ID number C						
3.	FEC ID number C						
4.	FEC ID number C						

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FEC Form 1 (Revi	sed 02/2009)				 Page 3
Write or Type Committee		· · · · · · · · · · · · · · · · · · ·			
Indepe	ndent				
6. Name of Any Connect	ed Organization, Affiliate	d Committee, Joint	Fundraising Rep	resentative, or Le	eadership PAC Sponsor
			1111		
	<u> </u>	1 1 1 1 1 1 1	<u> </u>	<u> </u>	<u> </u>
Mailing Address					
		CITY		STATE	ZIP CODE
Relationship: Conn	ected Organization Aff	liated Committee	Joint Fundraisin	g Representative	Leadership PAC Sponsor
 Custodian of Records: books and records. 	Identify by name, address	s (phone number — o	ptional) and pos	tion of the person	in possession of committee
Full Name	CIOIBI WILLEICIK	4	1 1 1 1	<u> </u>	
Mailing Address	12,20 1C141S	IT LE CITI			
	SIMIN JA	LUTIA		KA 19	7683-
Title or Position		CITY		STATE	ZIP CODE
KIHILEF EX	ELUTITIVE		Telephone nu	mber <u>[9.5]</u>]-[4.6.8]-[0.2.6.7
B. Treasurer: List the name any designated agent (e	e and address (phone nur .g., assistant treasurer).	nber optional) of th	e treasurer of th	e committee; and	the name and address of
Full Name of Treasurer			1111.		
Mailing Address			1.1.1.1.1		
		CITY		STATE	ZIP CODE
Title or Position		ı			
			Telephone nu	mber L	-

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Name of Bank, Depository, etc.

FEC Form 1 (Revised 02/2009)

Mailing Address

CITY

CITY STATE

STATE

ZIP CODE

ZIP CODE

Page 4

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2014 APR 14 AM 10: 59 FEC MAIL CENTER Federal Election Commission agg Estreet, N.W. Washington, DC, 20463

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DATE PREPARED

(8/2013)